Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 1 of 51

Fill in this information to ident	ify your case:		
United States Bankruptcy Court	for the:		
Northern District of Illinois		UNITED STATES PANEDUSTS	
		UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS	
Case number (If known):	Chapter you are filing under: ☑ Chapter 7	MAY 18 2016	
	Chapter 11	in TO SAIP	
	Chapter 12 Chapter 13	IFFEDEV D D Check if this is a	an
		JEFFREY P. ALLSTEADTENCE HIPS	
Official Form 101			
Voluntary Peti	ition for Individuals Fili	ng for Bankruptcy	12/15
<i>joint case</i> —and in joint cases, th the answer would be yes if eithe	and Debtor 1 to refer to a debtor filing alone. A marrienese forms use you to ask for information from both or debtor owns a car. When information is needed about them. In joint cases, one of the spouses must report n all of the forms.	debtors. For example, if a form asks, "Do you own out the spouses separately, the form uses <i>Debtor</i>	n a car," 1 and
Be as complete and accurate as information. If more space is ned (if known). Answer every question	possible. If two married people are filing together, bo eded, attach a separate sheet to this form. On the top on.	oth are equally responsible for supplying correct of any additional pages, write your name and cas	se number
Part 1: Identify Yourself			
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Ca	se):
ı. Your full name			
Write the name that is on your	Clarissa		
government-issued picture identification (for example,	First name	First name	
your driver's license or	K.		
passport).	Middle name Thomas	Middle name	
Bring your picture identification to your meeting	Last name	Last name	***************************************
with the trustee.	***************************************		
	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)	
e a serial de la seguina que alta para de la granda de la seria de la seguina de la composição de la seguina d	te filosoficiones filosoficiones en especies de estados en especies en especies en especies en especies en especies		
. All other names you	Same-as-above		
have used in the last 8	First name	First name	
years Include your married or	Middle name	Middle name	
maiden names.		Winds Halle	
	Last name	Last name	
	First name	First name	
	Middle name	Middle name	
	Last name	Last name	
. Only the last 4 digits of			
your Social Security	xxx - xx - <u>7 8 6 6</u>	xxx - xx	
number or federal Individual Taxpayer	OR	OR	
identification number (ITIN)	9 xx - xx	9 xx xx	

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 2 of 51

Debtor 1	Clarissa K.	Thomas Last Name		Case number (if known)	
				e wantan an a	
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint	Case):
and E Ident (EIN)	business names Employer ification Numbers you have used in	I have not used any be	usiness names or EINs.	☐ I have not used any business names of	EINs.
	e trade names and	Business name		Business name	
	business as names	Business name	**************************************	Business name	
		EIN		EIN	
		EIN — — — —		EIN -	
5. Wher	e you live	er er en	and the second s	If Debtor 2 lives at a different address:	
		602 Virginia Number Street		Number Street	
		Lynwood	IL 60411		
		City Cook	State ZIP Code	City State	ZIP Code
		County		County	
		If your mailing address is above, fill it in here. Note any notices to you at this r	that the court will send	If Debtor 2's mailing address is different yours, fill it in here. Note that the court will any notices to this mailing address.	from send
		Number Street		Number Street	
		P.O. Box		P.O. Box	
		City	State ZIP Code	City State	ZIP Code
6. Why y	ou are choosing	Check one:		Check one:	
bankr		Over the last 180 days I have lived in this distr other district.	before filing this petition, ict longer than in any	Over the last 180 days before filing this I have lived in this district longer than in other district.	petition, any
		☐ I have another reason. (See 28 U.S.C. § 1408		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 3 of 51

De	ebtor 1	Clarissa First Name	K.		homa	as	obedom	Case number (##	known)
				•					
P	art 2i T	ell the Cour	t Abou	t Your E	lankru	ptcy Case			
7. The chapter of the Bankruptcy Code you		ou	Check of	ne. (Foi cruptcy (a brief description (Form 2010)). Also, (of each, see <i>Noti</i> go to the top of p	ce Required by 11 age 1 and check to	1 U.S.C. § 342(b) for Individuals Filing he appropriate box.	
	are choosing to file under			☑ Cha			•		
	unu c i			☐ Cha	pter 11				
				☐ Cha	pter 12				
				☐ Cha	pter 13				
8.	How you	ı will pay the	e fee	loca your subn with I nee App I rec By I: less pay	I court reself, you mitting to a pre-red to p dication puest that aw, a just than 18 the fee	for more details all but may pay with cayour payment on yorinted address. ay the fee in inst for Individuals to mat my fee be wardge may, but is no 50% of the official in installments). If	allments. If you may be allments. If you was allments. If you was allments allments are the four may be transferred to a poverty line the four choose the ask of you choose the ask of your choose the your choose the ask of your choose the y	nay pay. Typical check, or money ur attorney may u choose this op Fee in Installme request this optwaive your fee, at applies to you his option, you m	eck with the clerk's office in your ally, if you are paying the fee order. If your attorney is pay with a credit card or check official form 103A). Ition only if you are filing for Chapter 7, and may do so only if your income is ar family size and you are unable to nust fill out the Application to Have the with your petition.
9.	Have yo	u filed for		2 No					
	bankrup last 8 ye	tcy within th	ie		District	***************************************	When	MM / DD / YYYY	Case number
					District		When		
					District		When		Case number
								MM / DD / YYYY	
10.		bankruptcy	t	2 No					
	filed by a	ending or be a spouse wh	o is	Yes.	Debtor				Relationship to you
					District	**************************************	When	MM / DD / YYYY	Case number, if known
					Debtor				Relationship to you
					District		When	MM / DD / YYYY	Case number, if known
	Do you r residenc			☑ No. ☑ Yes.	resider	ur landlord obtained ice? . Go to line 12.			and do you want to stay in your
					this	s. Fill out <i>Initial State</i> bankruptcy petition	ement About an E	Eviction Judgment	Against You (Form 101A) and file it with

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 4 of 51

Debtor 1	Clarissa K.		homas	Case	e number (if known)	
Part 3	Report About Any I	3usiness	es You Own as a Sc	le Proprietor		
of a	you a sole proprietor any full- or part-time		6o to Part 4.			
	siness?	∟ Yes.	Name and location of bi	usiness		
busi indi: sep:	ole proprietorship is a iness you operate as an vidual, and is not a arate legal entity such as propration, partnership, or		Name of business, if any			
LLC If vo	i. ou have more than one		Number Street			
sole sepa	proprietorship, use a arate sheet and attach it his petition.	•		***************************************		
io a	iis petitori.	•	City		State ZIP Code	147011111111111111111111111111111111111
			Check the appropriate b	ox to describe your busines	ss:	
				ss (as defined in 11 U.S.C. §		
		1	☐ Single Asset Real E	state (as defined in 11 U.S.	C. § 101(51B))	
			Stockbroker (as defi	ned in 11 U.S.C. § 101(53A))	
		l	Commodity Broker (as defined in 11 U.S.C. § 10)1(6))	
			None of the above			
Cha Ban are	you filing under upter 11 of the ukruptcy Code and you a small business utor?	can set a most rece any of the	ppropriate deadlines. If ent balance sheet, state ese documents do not e	, the court must know wheth you indicate that you are a ment of operations, cash-flo xist, follow the procedure in	small business debtor, you i	must attach vour
For	a definition of small	2 No. 1	am not filing under Cha	pter 11.		
	ness debtor, see J.S.C. § 101(51D).	☐ No. I	am filing under Chapte he Bankruptcy Code.	r 11, but I am NOT a small t	ousiness debtor according to	o the definition in
		Yes, I	am filing under Chapter Bankruptcy Code.	11 and I am a small busine	ess debtor according to the	definition in the
Part 4:	Report if You Own o	or Have A	iny Hazardous Prop	erty or Any Property T	hat Needs Immediate	Attention
4 Day	ou own or have any					
proj	perty that poses or is	∠ 2 No				
	ged to pose a threat nminent and	₩ Yes.	What is the hazard?			
	tifiable hazard to lic health or safety?					
Or d	lo you own any					
	perty that needs lediate attention?		If immediate attention is	s needed, why is it needed?		
peris that i	example, do you own hable goods, or livestock must be fed, or a building needs urgent repairs?					
	- ·		Where is the property?			
				Number Street		
				City	State	7IP Code
				O.14	State	ZIP Code

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 5 of 51

Debtor 1

Clariss	a K.	Thomas
rst Name	Middle Name	Loct Mamo

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debto	Ж	7	:
-------------	---	---	---

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

u	I am not required to receive a briefing ab	out
	credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I I am not required to receive a briefing a	bout
credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 6 of 51

Debtor 1 <u>Clarissa K.</u> First Name Middle N.	. Inomas Ame Last Name	Case number (if kin	own)
De Colon Annual Theorem	- u47 fr		
Part 6: Answer These Que	estions for Reporting Purpe	oses	
16. What kind of debts do you have?	as "incurred by an individ	arily consumer debts? Consumer deb dual primarily for a personal, family, or hou	ots are defined in 11 U.S.C. § 101(8) sehold purpose."
	☐ No. Go to line 16b.☑ Yes. Go to line 17.		
	16b. Are your debts prim money for a business or	arily business debts? Business debts investment or through the operation of the	are debts that you incurred to obtain business or investment.
	□ No. Go to line 16c.□ Yes. Go to line 17.		
	16c. State the type of debts y	rou owe that are not consumer debts or but	siness debts.
17. Are you filing under Chapter 7?	☐ No. I am not filing under (Chapter 7. Go to line 18.	**************************************
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	administrative expens	pter 7. Do you estimate that after any exer ses are paid that funds will be available to	npt property is excluded and distribute to unsecured creditors?
8. How many creditors do you estimate that you owe?	2 1-49 □ 50-99 □ 100-199 □ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
How much do you estimate your liabilities to be? art 76 Sign Below	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	☐ \$500,000,001-\$1 billion ☐ \$1,000,000,001-\$10 billion ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion
For you	I have examined this petition, a	and I declare under penalty of perjury that	the information provided is true and
	If I have chosen to file under C	Chapter 7, I am aware that I may proceed, i . I understand the relief available under ear	f eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed
	If no attorney represents me arthis document, I have obtained	nd I did not pay or agree to pay someone vit and read the notice required by 11 U.S.C	who is not an attorney to help me fill out . § 342(b).
	I request relief in accordance v	with the chapter of title 11, United States C	ode, specified in this petition.
	I understand making a false sta with a bankruptcy case can res 18 U.S.C. §§ 152, 1341, 1519,	atement, concealing property, or obtaining sult in fines up to \$250,000, or imprisonme and 3571.	money or property by fraud in connection nt for up to 20 years, or both.
	Signature of Debtor 1	Sumas *	of Debtor 2
	Executed on <u>0.5</u> / <u>//</u>	ACIU Executed	

	Case 16-1	.6772	Doc 1 Filed 05/18/10 Document	Page 7 of 51
Debtor 1	Clarissa First Name	K.	Thomas Last Name	Case number (if known)
			2004 (1977)	
bankru _l attorne		ī	should understand that ma themselves successfully. I	dividual, to represent yourself in bankruptcy court, but you any people find it extremely difficult to represent Because bankruptcy has long-term financial and legal congly urged to hire a qualified attorney.
an attor	re represented ney, you do no file this page.		To be successful, you must co technical, and a mistake or ina dismissed because you did no hearing, or cooperate with the firm if your case is selected for	orrectly file and handle your bankruptcy case. The rules are very action may affect your rights. For example, your case may be t file a required document, pay a fee on time, attend a meeting or court, case trustee, U.S. trustee, bankruptcy administrator, or audit a audit. If that happens, you could lose your right to file another ons, including the benefit of the automatic stay.
			court. Even if you plan to pay a in your schedules. If you do no property or properly claim it as also deny you a discharge of a case, such as destroying or hid cases are randomly audited to	and debts in the schedules that you are required to file with the a particular debt outside of your bankruptcy, you must list that debt it list a debt, the debt may not be discharged. If you do not list exempt, you may not be able to keep the property. The judge can ll your debts if you do something dishonest in your bankruptcy ding property, falsifying records, or lying. Individual bankruptcy determine if debtors have been accurate, truthful, and complete.
			hired an attorney. The court wi successful, you must be familia	attorney, the court expects you to follow the rules as if you had all not treat you differently because you are filing for yourself. To be are with the United States Bankruptcy Code, the Federal Rules of elocal rules of the court in which your case is filed. You must also eption laws that apply.
			consequences?	nkruptcy is a serious action with long-term financial and legal
			☐ No ☑ Yes	
			Are you aware that bankruptcy inaccurate or incomplete, you construct No Yes	fraud is a serious crime and that if your bankruptcy forms are could be fined or imprisoned?
			Did you pay or agree to pay sor No Yes. Name of Person Tania	meone who is not an attorney to help you fill out your bankruptcy forms Stoxstell on Preparer's Notice, Declaration, and Signature (Official Form 119).
			By signing here, I acknowledge have read and understood this	that I understand the risks involved in filing without an attorney. I notice, and I am aware that filing a bankruptcy case without an my rights or property if I do not properly handle the case.
		5	X Clause 1h	
			andreame of Dehini I	Signature of Debtor 2

Date

Contact phone

Cell phone

Email address

Date

Cell phone

Email address

MM / DD / YYYY

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Page 8 of 51 Document

Debtor 1	Clarissa	K.	Thomas
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if fill	ing) First Name	Middle Name	Last Name
United State	es Bankruptcy Court for	the: Northern District of	Illinois
Case numb	er		

☐ Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

1a. Copy line 55, Total real estate, from Schedule A/B	Part 1: Summarize Your Assets		
1b. Copy line 62, Total personal property, from Schedule A/B			
1b. Copy line 62, Total personal property, from Schedule A/B		•	0.00
1c. Copy line 63, Total of all property on Schedule A/B \$ 13,397 Part 2: Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D. \$ 1,000 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F. \$ 0 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F. \$ 20,072 Your total liabilities **Schedule I: Your Income** (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I. \$ 792	1a. Copy line 55, Total real estate, from Schedule A/B	.	0.00
Part 2: Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	1b. Copy line 62, Total personal property, from Schedule A/B	\$	13,397.00
Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	1c. Copy line 63, Total of all property on Schedule A/B	\$	13,397.00
Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	Part 2: Summarize Your Liabilities		
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D			
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		\$	1,000.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F Your total liabilities \$ 21,072 Schedule I: Your Income (Official Form 106l) Copy your combined monthly income from line 12 of Schedule I. * 792	·	\$	0.00
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I. \$ 792		+ \$	20,072.00
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	Your total liabilities	\$	21,072.00
Copy your combined monthly income from line 12 of Schedule I	• • • • • • • • • • • • • • • • • • •		
Copy your combined morning income from line 12 of Scriedule 1	Part 3: Summarize Your Income and Expenses		
Pohodula b Vous European (Official Form 400 B)	Schedule I: Your Income (Official Form 106I)	\$	792.00
Copy your monthly expenses from line 22c of Schedule J	4. Schedule I: Your Income (Official Form 106I)	\$	792.00

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 9 of 51

De	ebtor 1	Clarissa		K.	Thomas	Case number (if known)		_
	arit 4:	First Name Answer The	Middle Name	Last Name ons for Admini	strative and Statistic	al Records		
6.	Are you	filing for ban	kruptcy und	ler Chapters 7, 1	I1, or 13?			
	No. Yes	You have nothi	ing to report	on this part of the	e form. Check this box and	submit this form to the court with you	r other schedules.	
7.	What kir	nd of debt do	you have?					
	Your famil	r debts are pr i y, or househol	imarily cons	sumer debts. Co. 11 U.S.C. § 101(8	nsumer debts are those "ir 3), Fill out lines 8-9g for sta	ncurred by an individual primarily for a tistical purposes. 28 U.S.C. § 159.	personal,	
				consumer debts other schedules.	. You have nothing to repo	rt on this part of the form. Check this	box and submit	
8.					ome: Copy your total curre Form 122C-1 Line 14.	nt monthly income from Official	\$960.00	-
9.	Copy the	e following sp	ecial catego	ories of claims f	rom Part 4, line 6 of Sche	dule E/F:		
						Total claim		
9.	Copy the	e following sp	oecial catego	ories of claims f	rom Part 4, line 6 of Sche			

From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00
9g. Total . Add lines 9a through 9f.	\$0.00

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 10 of 51

Fill in this information to identify your case and th	is filing:		
Debtor 1 Clarissa K.	Thomas		
First Name Middle Name Debtor 2	Last Name		
(Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: Northern District o	f Illinois		
Case number		Γ.	Check if this is an
		Veines	amended filing
Official Form 106A/B			
Schedule A/B: Propert	ty .		12/15
In each category, separately list and describe item category where you think it fits best. Be as comply responsible for supplying correct information. If n write your name and case number (if known). Ansex 11: Describe Each Residence, Building	ete and accurate as possible. If two married peop nore space is needed, attach a separate sheet to t	le are filing together, bot his form. On the top of a	th are equally
Do you own or have any legal or equitable interes	est in any residence, building, land, or similar pro	perty?	
☑ No. Go to Part 2.	•	-	
Yes. Where is the property?	What is the property? Check all that apply.		
	☐ Single-family home	Do not deduct secured cla the amount of any secured	I claims on Schedule D:
1.1. Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Claim	s Secured by Property.
	☐ Condominium or cooperative ☐ Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	Land	\$0.00	\$ 0.00
	☐ Investment property - ☐ Timeshare	Describe the nature o	f vour ownership
City State ZIP Code	Other	interest (such as fee s the entireties, or a life	imple, tenancy by
	Who has an interest in the property? Check one		estate), ii known.
	Debtor 1 only		
County	Debtor 2 only Debtor 1 and Debtor 2 only	Check if this is cor	nmunity property
	At least one of the debtors and another	(see instructions)	mand property
	Other information you wish to add about this	tem, such as local	
If you own or have more than one, list here:	property identification number:		
,	What is the property? Check all that apply.	Do not deduct secured clai	ms or exemptions. Put
1.2.	Single-family home	the amount of any secured Creditors Who Have Claim	claims on Schedule D:
Street address, if available, or other description	Duplex or multi-unit building Condominium or cooperative		, , ,
	Manufactured or mobile home		Current value of the portion you own?
	Land	\$0.00	\$0.00
	Investment property Timeshare	Describe the nature of	your ownership
City State ZIP Code	Other	interest (such as fee s the entireties, or a life	imple, tenancy by
	Who has an interest in the property? Check one.		
	Debtor 1 only		
County	Debtor 2 only Debtor 1 and Debtor 2 only	□ • • • • • • • • • • • • • • • • • • •	
	☐ At least one of the debtors and another	Check if this is con (see instructions)	nmunity property
	Other information you wish to add about this it	,	
	property identification number:		

Debtor 1	Case 16-16 Clarissa First Name Midd	772 DOC 1 F K.	Filed 05/18/16 Entered 05/18/16 Document Page 11 of 51 Case number of		
1.3.	Street address, if availab	le, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 0.00	ed claims on Schedule D:
	City	State ZIP Code	Investment property Timeshare Other	Describe the nature interest (such as fee the entireties, or a life	simple, tenancy by
	County		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this its property identification number:	(see instructions)	ommunity property
2. Add to	he dollar value of the ave attached for Part	portion you own for a 1. Write that number i	ll of your entries from Part 1, including any entrie	s for pages	\$ 0.00
Pari 2:	Describe Your	/ehicles			
Part 2: Do you c you own: 3. Cars, □ No	own, lease, or have leg that someone else drive vans, trucks, tractors	al or equitable intereses. If you lease a vehicle	st in any vehicles, whether they are registered or ree, also report it on <i>Schedule G: Executory Contracts</i> or the contracts of the contract of the co	not? Include any vehicles and Unexpired Leases.	S
Part 2: Do you c you own: 3. Cars,	own, lease, or have leg that someone else drive vans, trucks, tractors	jal or equitable intereses. If you lease a vehicles, sport utility vehicles Buick LaSable	e, also report it on Schedule G: Executory Contracts and motorcycles Who has an interest in the property? Check one.	not? Include any vehicles and Unexpired Leases. Do not deduct secured clathe amount of any securer Creditors Who Have Claim	aims or exemptions. Put d claims on <i>Schedule D:</i>
Part 2: Do you c you own: 3. Cars, □ No ¥ Ye	wn, lease, or have leg that someone else drive vans, trucks, tractors des Make: Model: Year: Approximate mileage:	al or equitable intereses. If you lease a vehicles, sport utility vehicles	e, also report it on Schedule G: Executory Contracts and motorcycles Who has an interest in the property? Check one.	and Unexpired Leases. Do not deduct secured clathe amount of any secure.	aims or exemptions. Put d claims on <i>Schedule D:</i>
Part 2: Do you c you own: 3. Cars, \(\sum \) No	wwn, lease, or have leg that someone else drive vans, trucks, tractors o es Make: Model: Year:	al or equitable intereses. If you lease a vehicle, sport utility vehicles Buick LaSable 2004	e, also report it on Schedule G: Executory Contracts and motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	aims or exemptions. Put d claims on <i>Schedule D:</i> ns <i>Secured by Property.</i> Current value of the
Part 2: Do you over the your own the your o	wn, lease, or have leg that someone else drive vans, trucks, tractors des Make: Model: Year: Approximate mileage:	Buick LaSable 2004 200,000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property?	aims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
Part 2: Do you over the your own to see the y	wn, lease, or have leg that someone else drive vans, trucks, tractors of the ses. Make: Model: Year: Approximate mileage: Other information:	Buick LaSable 2004 200,000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property? \$ 600.00	aims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ 1,000.00 aims or exemptions. Put d claims on Schedule D:
Part 28 Do you own to	wwn, lease, or have leg that someone else drive vans, trucks, tractors of the ses. Make: Model: Year: Approximate mileage: Other information:	Buick LaSable 2004 200,000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ 600.00	aims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ 1,000.00 aims or exemptions. Put d claims on Schedule D:

Document Clarissa Debtor 1 Case number (if known) Who has an interest in the property? Check one. Make: 3.3. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: 0.00 0.00 Check if this is community property (see instructions) Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: 0.00 0.00 Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ☐ No Yes Who has an interest in the property? Check one. 4.1. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Үеаг: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? ☐ Check if this is community property (see 0.00 0.00 instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Debtor 1 and Debtor 2 only Current value of the entire property? portion you own? Other information: At least one of the debtors and another 0.00 0.00 Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages 1,000.00 you have attached for Part 2. Write that number here

Case 16-16772

Doc 1

Filed 05/18/16

Entered 05/18/16 14:53:30

Page 12 of 51

Desc Main

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main

Debtor 1

Clarissa

Page 13 of 51

Case number (if known)_

Part 3:

Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Household goods and furnishings	er error grande
Examples: Major appliances, furniture, linens, china, kitchenware	
□ No	
☑ Yes. Describe Household Furniture	s 2,500.00
- - -	¥
7. Electronics	
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanne collections; electronic devices including cell phones, cameras, media players, games	ers; music
☑ No ☐ Yes. Describe	
Tes. Describe	\$0.00
8. Collectibles of value	
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
2 No	
Yes. Describe	s 0.00
	V
9. Equipment for sports and hobbies	
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, ski and kayaks; carpentry tools; musical instruments	s; canoes
☑ No ☐ Yes. Describe	entre transfer og
Tes. Describe	\$0.00
10. Firearms	· · · · · · · · · · · · · · · · · · ·
Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
Z No	
☐ Yes. Describe	· s 0.00
	<u> </u>
11. Ciothes	
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
No Possiba and the same and the	$\mathcal{H}(X) = \{ (G, X) \in \mathcal{H}(X) \mid G \in \mathcal{H}(X) \}$
2 Yes. Describe Clothing for Me and My Dependents	\$1,000.00
12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gold, silver	, gems,
F2	
Yes. Describe	0.00
	\$ 0.00
13. Non-farm animals	
Examples: Dogs, cats, birds, horses	
☑ No ☐ Yes. Describe	s 0.00
	\$
14. Any other personal and household items you did not already list, including any health aids you did no	ot list
☑ No	
Yes. Give specific information	\$ 0.00
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attach	s3,500.00
for Part 3. Write that number here	- 0,000.00

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main

Debtor 1

Clarissa First Name

Page 14 of 51

Case number (if known)_

Part 4: Describe Your Financial Assets

Do you own or have an	y legal or equitable interest ir	n any of the following?		Current value portion you Do not deduct or exemptions.	own? secured claims
16. Cash Evamples: Money you	i have in vour wallet in vour he	mo in a cafe domesit have and an hand a hand	Pa. Ma		
	i nave in your wailer, in your no	me, in a safe deposit box, and on hand when you	file your petition		
Ø No □ Yes					0.00
_ ,00			Cash:	\$	0.00
17. Deposits of money <i>Examples:</i> Checking, and other	savings, or other financial acco similar institutions. If you have r	unts; certificates of deposit; shares in credit union nultiple accounts with the same institution, list eac	s, brokerage houses, h.		
☑ No					
☐ Yes		Institution name:			
	17.1. Checking account:			\$	0.00
	17.2. Checking account:			\$	0.00
	17.3. Savings account:			S	0.00
	17.4. Savings account:			S	0.00
	17.5. Certificates of deposit:			\$	0.00
	17.6. Other financial account:			\$	0.00
	17.7. Other financial account:			S	0.00
	17.8. Other financial account:			\$	0.00
	17.9. Other financial account:	A STATE OF THE STA		\$	0.00
18. Bonds, mutual funds	or publicly traded stocks				
	, investment accounts with brok	erage firms, money market accounts			
☑ No ☐ Yes	Institution or issuer name:				
					0.00
	***************************************			\$	0.00
	***			\$	0.00
				- 	
19. Non-publicly traded s	stock and interests in incorpo	rated and unincorporated businesses, including	ng an interest in		
an LLC, partnership,	_				
✓ No✓ Yes. Give specific	Name of entity:		% of ownership:		0.00
information about	MANAGEMENT OF THE PROPERTY OF		09/	\$	0.00
them			00/	\$	0.00
			070 %	ж	U.UU

5	Case 16-	16772 [K	Doc 1	Filed 05/18/16 Document Thomas	Page 15 of 51	Desc Main	
Debtor 1	First Name	Middle Name	Last N		Case number (if known)		
20. Gover	nment and corpo	orate bonds a	nd other !	negotiable and non-ne	gotiable instruments		
Negoti	iable instruments i	include person	al checks,	cashiers' checks, promi	issory notes, and money orders.		
	_	ents are those	you canno	t transfer to someone by	y signing or delivering them.		
Ø No	s. Give specific	Issuer name:					
info	ormation about	resuct thattic.				¢	0.00
the	m						0.00
						\$ \$	0.00
						Y	
21. Retire	ment or pension	accounts					
Examp	oles: Interests in If	RA, ERISA, Ke	eogh, 401(l	(), 403(b), thrift savings	accounts, or other pension or profit-sharing pla	ins	
Z No							
	s. List each count separately.	Type of accou	unt: In	stitution name:			
	, ,	401(k) or simil	ar nlan			\$	0.00
		`,	or horr			•	0.00
		Pension plan:	u-ma	www	<u> </u>	Ψ	0.00
		IRA:				_ \$	0.00
		Retirement acc	count:			\$	0.00
		Keogh:	_			\$	
		Additional acco	ount:			\$	0.00
		Additional acco	ount:			\$	0.00
22 Securi	ity deposits and	prepayments					
Yours	hare of all unused	d deposits you	have mad		nue service or use from a company		
	oles: Agreements nnies, or others	with landlords,	, prepaid re	ent, public utilities (electr	ric, gas, water), telecommunications		
☑ No							
	s		Institu	tion name or individual:			
		Electric:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			 \$	0.00
		Gas:				\$	0.00
		Heating oil:				Ψ	0.00
		Security depos	sit on rental	unit:		- \$	0.00
		Prepaid rent:				- \$	0.00
		Telephone:				- \$	0.00
		Water:				\$	0.00
		Rented furnitu	ıre:	W-W-W-W-W-W-W-W-W-W-W-W-W-W-W-W-W-W-W-		- \$	0.00
		Other:				\$	0.00

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

Z No		
☐ Yes	Issuer name and description:	
		\$ 0.0
		\$ 0.0
		\$ 0.0

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Thomas

Clarissa K. Document Thomas

First Name Middle Name Last Name

Case number (if known)

			ABLE program, or under a qualified s	state tuition progran	1.	
	26 U.S.C. §§ 530(b)(1), 529A((b), and 529(b)(1).				
	Z No					
l	☐ Yes	Institution name and description	on. Separately file the records of any into	erests.11 U.S.C. § 52	1(c):	
					_	0.00
		0.00			_ \$	
					_ \$	0.00
					- \$	0.00
05 T	minda amidable e & til	and a second a second and a second a second and a second a second and a second and a second and a second and				
2≎. I	rusts, equitable or future in exercisable for your benefit	iterests in property (other tha	n anything listed in line 1), and rights	or powers		
(⊒ No					
	Yes. Give specific			And the second second	No. of the second	
	information about them				\$	0.00
_				* * * * * * * * * * * * * * * * * * * *		
		arks, trade secrets, and other				
	Ż No	mes, websites, proceeds from n	oyalties and licensing agreements			
	Yes. Give specific	4. (4.4)	$(x_1, x_2, \dots, x_n) = (x_1, x_2, \dots, x_n) + (x_1, x_2, \dots, x_n)$	V		
•	information about them				\$	0.00
						
27. L	icenses, franchises, and ot	ther general intangibles				
E	xamples: Building permits, ex	xclusive licenses, cooperative a	ssociation holdings, liquor licenses, profe	essional licenses		
	1 No					
	Yes. Give specific					0.00
	information about them				\$	0.00
		•			V	
MION	ey or property owed to you'	•				ent value of the on you own?
					Do not	deduct secured
_					claims	or exemptions.
	ax refunds owed to you					
	No State of the st					
Ļ	Yes. Give specific informati about them, including			Federal:	\$	8,256.00
	you already filed the re	returns		State:	\$	641.00
	and the tax years	***************************************		Local:	\$	0.00
29. F	amily support					
		um alimony, spousal support, ch	nild support, maintenance, divorce settler	ment, property settlen	nent	
V	1 No					
	Yes. Give specific informati	ion				0.00
				Alimony:	\$	0.00
				Maintenance:	\$	0.00
				Support:	\$	0.00
				Divorce settlement:	\$	0.00
				Property settlement:	\$	0.00
30. Q	ther amounts someone owe	es you	The Arms of the Control of the Contr			
E	x <i>ampies:</i> Unpaid wages, disa Social Security beni	ibility insurance payments, disat efits; unpaid loans you made to	oility benefits, sick pay, vacation pay, wo someone else	orkers' compensation		
Z	No	,				
		ion				
<u>_</u>	Yes. Give specific informati	IVI I				0.00

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Mai

Case number (if known)

Debtor 1 Clarissa K. Document Inomas Page 17 of 51
Case

31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Z No ☐ Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value... 0.00 0.00 0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. Z No ☐ Yes. Give specific information..... 0.00 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue Z No Yes. Describe each claim..... 0.00 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims Z No Yes. Describe each claim..... 0.00 35. Any financial assets you did not already list Z No ☐ Yes. Give specific information...... 0.00 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached 8,897.00 for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned ☐ No Yes. Describe..... 0.00 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices ☐ No ☐ Yes. Describe...... 0.00

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Page 18 of 51 Document Clarissa Debtor 1 Case number (if known)_ 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade ☐ No Yes. Describe...... 0.00 41. Inventory ☐ No Yes. Describe...... 0.00 42. Interests in partnerships or joint ventures Yes. Describe...... Name of entity: % of ownership: 0.00 0.00 0.00 43. Customer lists, mailing lists, or other compilations ☐ No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? ☐ No Yes, Describe...... 0.00 44. Any business-related property you did not already list ☐ No ☐ Yes. Give specific 0.00 information 0.00 0.00 0.00 0.00 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached 0.00 for Part 5. Write that number here Part 6 Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? Mo. Go to Part 7. ☐ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish ☐ No

☐ Yes.....

0.00

Page 19 of 51 Clarissa Debtor 1 Case number (if known), 48. Crops-either growing or harvested ☐ No Yes. Give specific 0.00 information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ☐ No ☐ Yes..... 0.00 50. Farm and fishing supplies, chemicals, and feed **Q** Yes..... 0.00 51. Any farm- and commercial fishing-related property you did not already list ☐ No Yes. Give specific 0.00 information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0.00 for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership 2 No 0.00 ☐ Yes. Give specific 0.00 information..... 0.00 0.00 54 Add the dollar value of all of your entries from Part 7. Write that number here Carter List the Totals of Each Part of this Form 0.00 55. Part 1: Total real estate, line 2 1,000.00 56. Part 2: Total vehicles, line 5 3,500.00 57. Part 3: Total personal and household items, line 15 8,897.00 58. Part 4: Total financial assets, line 36 0.00 59. Part 5: Total business-related property, line 45 0.00 60. Part 6: Total farm- and fishing-related property, line 52 0.00 61 Part 7: Total other property not listed, line 54 13,397.00 Copy personal property total → +\$ 13,397.00 62. Total personal property. Add lines 56 through 61. 13,397.00 63. Total of all property on Schedule A/B. Add line 55 + line 62.

Case 16-16772

Doc 1

Filed 05/18/16

Entered 05/18/16 14:53:30

Desc Main

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 20 of 51

Fill in t	his inform	ation to identify yo	ur case:								
Debtor '	·	rissa	K.	Th	omas		Transmusta				
Debtor 2			Middle Name		Last Name		<u> </u>				
	if filing) First!		Middle Name		Last Name						
_		uptcy Court for the: Nor	tnem Distri	ict of Illinois							
Case nu (If known										Check i amende	
											•
Offici	al For	m 106C									
Sch	edul	e C: The	Prop	erty	You	Claim	as	Exemp	t		12/15
Using the space is a your nam For each specific of any ar	e property y needed, fill ie and case i item of pi dollar amo oplicable s	i accurate as possible to listed on Schedul out and attach to this number (if known). roperty you claim as ount as exempt. Alto statutory limit. Some may be unlimited in	e A/B: Props s page as n s exempt, y ernatively, exemptio	perty (Official many copies you must s you may cl ans—such a	al Form 106, of Part 2: A pecify the a aim the full as those for	A/B) as your so additional Page amount of the fair market vo	exempt alue of t	at the property the essary. On the to tion you claim. (the property be to receive certain	at you claim a p of any addi One way of d ng exempted benefits, an	s exempt. If mo- tional pages, wri loing so is to st d up to the amo	re ite tate a ount
limits the	e exemption in the exemptin in the exemption in the exemption in the exemption in the exemp	on to a particular do the applicable stat	llar amour utory amo	nt and the vount.	alue of the	property is de	etermine	ed to exceed the	at amount, yo	our exemption	
A /	You are cla You are cla	xemptions are you iming state and feder iming federal exempt rty you list on Sche	al nonbank ions. 11 U	kruptcy exer .S.C. § 522	mptions. 11 (b)(2)	U.S.C. § 522(t)(3)				
Brie Sch	ef descripti redule A/B	ion of the property ar that lists this proper	id line on	Current va		Amount of the	ne exem _i	ption you claim	Specific I	aws that allow e	xemption
				Copy the vi Schedule A		Check only or	ne box fo	or each exemption			
Briet desc	f cription:	Household	····	\$ <u>2,500</u> .	00	2 \$ 2,500	0.00		735 ilcs	5/12-1001(b))
Line	from edule A/B:	6						ket value, up to atutory limit		NAME OF THE OWNER O	***************************************
	pription:	Clothing	· · · · · · · · · · · · · · · · · · ·	\$ <u>1,000.</u>	00	2 \$ 1,000			735 ilcs	5/12-1001(a))
	from ∌dule A/B;	11						ket value, up to atutory limit	****		
	ription:	Auto	*, * *,,	\$ <u>1,000.0</u>	00	\$ 1,000			735 ilcs	5/12-1001(c)	
	from edule A/B:	3.1						ket value, up to atutory limit			
		ng a homestead exe stment on 4/01/16 ar				a filad an ar an	ا حمالة مع	nto all callingtons of	. `		
Z ÍN	lo	u acquire the property						·)		
] No	acquire me properti	COVERED D	y the exem	POOLI WITHIN	1,215 days bet	ore you	med this case?			

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 21 of 51

Fill the				
Fill in this information to identify your ca				
Debtor 1 Clarissa K. First Name Middle	Thomas Name Last Name			
Debtor 2				
(Spouse, if filing) First Name Middle	Name Last Name			
United States Bankruptcy Court for the: Northern	District of Illinois			
Case number			□ Cho	ck if this is an
				nded filing
011 : 1 = 400				Ü
Official Form 106D				
Schedule D: Creditor	s Who Have Claims Secu	red by Pro	perty	12/15
Be as complete and accurate as possible	. If two married people are filing together, both are	equally responsible	for supplying corr	ect
information. If more space is needed, cor additional pages, write your name and ca	by the Additional Page, fill it out, number the entri	s, and attach it to this	form. On the top	of any
and the second page of the second second of the second sec	oc namos (s knows).			
1. Do any creditors have claims secured				
No. Check this box and submit this for	m to the court with your other schedules. You have n	othing else to report on	this form.	
Yes. Fill in all of the information below				
Part & List All Secured Claims				
ALISE LIST AII OCCUPED CIRCIIS		Caliman	0.1	
2. List all secured claims. If a creditor has	more than one secured claim, list the creditor separate	Column A Ply Amount of claim	Column B Value of collaters	Column C al Unsecured
for each claim. If more than one creditor I	has a particular claim, list the other creditors in Part 2 habetical order according to the creditor's name.	Do not deduct the	that supports this	
	nabelical order according to the creditor's frame.	value of collateral.	claim	If any
2.1 Six Day Auto	Describe the property that secures the claim:	\$600.00	\$ 600.0	0.00
Creditor's Name		Announce is		
7349 S. Western Avenue	•			
	As of the date you file, the claim is: Check all that ap			
	Contingent	r.,,		
Chicago IL 60636 City State ZIP Code	Unliquidated			
,	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secure	d		
Debtor 2 only Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
	Other (including a right to offset)	*********		
☐ Check if this claim relates to a community debt				
Date debt was incurred 03/16/2015	Last 4 digits of account number 7 8 6 6			
2.2	Describe the property that secures the claim:		s	• •
Creditor's Name	3		Y	V
Number Street				
Number Street	As of the date you file, the claim is: Check all that ap	.h.		
	Contingent	ny.		
	☐ Unliquidated			
City State ZiP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secure	đ		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit			
	Other (including a right to offset)			
Check if this claim relates to a community debt Date debt was incurred	Last 4 digits of account number	MARAMAN MARAMA		
	Column A on this page. Write that number here:	ls 600.00	the state of the s	

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 22 of 51

Fill in this information to identify your case:				
Debtor 1	Clarissa First Name	K.	Thomas Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for	rthe: Northern District of I	llinois	
Case number (If known)				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1:

List Your Creditors Who Have Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: C information below.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.							
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?						
	Creditor's name: Six Day Auto Description of 2004 Buick LaSable property	 ☐ Surrender the property. ☐ Retain the property and redeem it. ☑ Retain the property and enter into a 	☑ No ☑ Yes						
	securing debt:	Reaffirmation Agreement. Retain the property and [explain]:							
	Creditor's name:	Surrender the property.	□ No						
	Description of property securing debt:	 Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. 	☐ Yes						
		Retain the property and [explain]:	.						
	Creditor's name:	Surrender the property.	☐ No						
	Description of	Retain the property and redeem it. Retain the property and enter into a	☐ Yes						
	property securing debt:	Reaffirmation Agreement.							
		Retain the property and [explain]:	•						
	Creditor's	☐ Surrender the property.	□ No						
	Description of	Retain the property and redeem it.	Yes						
	property securing debt:	Retain the property and enter into a Reaffirmation Agreement.							
	-	Retain the property and [explain]:							
		· · · · · · · · · · · · · · · · · · ·							

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 23 of 51

Debtor 1 Clarissa K. Thomas
First Name Middle Name Last Name

Case number (If known)

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired pers	onal property leases	Will the lease be assumed?	
Lessor's name:		☑ No	
Description of leased property:		☐ Yes	
Lessor's name:		□ No	
Description of leased property:		☐ Yes	
Lessor's name:		□ No	
Description of leased property:		☐ Yes	
.essor's name:		——————————————————————————————————————	
.casor s name.		□ No	
Description of leased property:		☐ Yes	
.essor's name:		☐ No	
Description of leased property:		☐ Yes	
essor's name:			
essoi s name.		□ No	
Description of leased property:		☐ Yes	
essor's name:		□ No	
Description of leased property:		☐ Yes	
·			
Sign Below			
Jelian Sign Delow			
nder penalty of perjury, I dec ersonal property that is subje	elare that I have indicated my intention about any prope act to an unexpired lease.	erty of my estate that secures a debt and any	
Clarisalh		Managala kan Managa Ada Anga Anga Anga Anga Anga Anga Anga Ang	
Signature of Debtor 1	Signature of Debtor 2		
Date <u>P.5 (10 40) (</u> 0 MM / DD / YYYY	Date MM / DD / YYYY		

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 24 of 51 Fill in this information to identify your case: Clarissa Thomas Debtor t First Name Middle Name Debtor 2 (Spouse, if filing) First Name tast Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an (If known) amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Cara de **List All of Your PRIORITY Unsecured Claims** 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim **Priority** Nonpriority amount amount 2.1 Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unfiguidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were Is the claim subject to offset? intoxicated Other, Specify ON D Yes 2.2 Last 4 digits of account number When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were ☐ Check if this claim is for a community debt intoxicated Is the claim subject to offset? Other. Specify __ ☐ No

Yes

	Casc ID-ID112	DUCI	i iica osi.
Dobtor 1	Clarissa	K	Dog Physical

Page 25 of 51 number (if known)

383			528		2011	
				1.5		
	***	3	87	100		

List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

	☐ No. You have nothing to report in the Yes	his part. Su	bmit this form to t	he court with your other schedules.				
	nonpriority unsecured claim, list the cre	editor sepai editor holds	ately for each cla	I order of the creditor who holds each claim. If a creditor had im. For each claim listed, identify what type of claim it is. Do not, list the other creditors in Part 3.If you have more than three no	liet clair	ne alreadu		
4.1	ComEd				Total	claim		
L	Nonpriority Creditor's Name			Last 4 digits of account number 5 0 6 5	\$	1,100.00		
	P.O. Box 6111	·		When was the debt incurred? 10/11/2013	Ψ,			
	Carol Stream	IL State	60197 ZIP Code	As of the date you file, the claim is: Check all that apply.				
	·	4.2.0	211 0000	P****				
	Who incurred the debt? Check one,			☐ Contingent				
	Debtor 1 only			☐ Unliquidated ☐ Disputed				
	Debtor 2 only			Disputed				
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another			☐ Student loans				
	Check if this claim is for a commu	nity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts				
	Ø No			Other Specify Utility Multiple Accts				
	Yes							
			A Section of the section of	and the second control of the second control		0 700 00		
4.2	Nicor Gas			Last 4 digits of account number 3 4 7 0	\$	3,762.00		
	Nonpriority Creditor's Name			When was the debt incurred?				
	P.O. Box 5407 Number Street		·	~				
	Carol STream	iL	60197	As of the date you file, the claim is: Check all that apply.				
	City	State	ZIP Code	no.				
			*****	☐ Contingent				
	Who incurred the debt? Check one.			Unliquidated				
	Debtor 1 only			☐ Disputed				
	Debtor 2 only			Type of NONPRIORITY unsecured claim:				
	Debtor 1 and Debtor 2 only							
				Student loans				
	Check if this claim is for a commun	nity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 				
	Is the claim subject to offset?							
	☑ No			Other. Specify Utility Account				
	Yes							
4.3	The second secon	****	the state of the s	en de la Marie de la Carta de				
	Mid America Bank Nonpriority Creditor's Name			Last 4 digits of account number 7 8 6 6	•	316.00		
				When was the debt incurred? 03/16/2016	Φ			
	1830 W Fullerton Ave # 21 Number Street		•	•				
	Chicago	IL	60614					
	City	State	ZIP Code	- As of the date you file, the claim is: Check all that apply.				
	Who incurred the debt? Check one.			☐ Contingent				
				☐ Unliquidated				
	Debtor 1 only			☐ Disputed				
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another							
				Type of NONPRIORITY unsecured claim:				
				Student loans				
	☐ Check if this claim is for a community debt			Obligations arising out of a separation agreement or divorce				
	Is the claim subject to offset?			that you did not report as priority claims				
	☑ No			Debts to pension or profit-sharing plans, and other similar debts				
	Yes			Other. Specify <u>Collections Account</u>				

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main

Clarissa K. Dochmast Page 26 of 51

First Name Middle Name Last Name

Last Name Last Name Last Name

Debtor 1

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ij.	•	-1		w	2
	畾	od.	Mari	ы.	'n.

Your NONPRIORITY Unsecured Claims — Continuation Page

Af	er listing any entries on this page, n	umber the	m beginning with	4.4, followed by 4.5, and so forth.	Total claim
4.4	First Premier Bank Nonpriority Creditor's Name			Last 4 digits of account number 7 8 6 6	s389.00
	P.O. Box 5529			When was the debt incurred? 10/07/2011	
	Number Street Sioux Falls	SD	57117	As of the date you file, the claim is: Check all that apply.	
	City Who incurred the debt? Check one.	State	ZIP Code	Contingent Unliquidated Disputed	
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a commuls the claim subject to offset? ☑ No ☐ Yes	nity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other Specify Collections Account	
4.5	Penn Foster School Nonpriority Creditor's Name			Last 4 digits of account number 8 5 3 2	\$ <u>1,540.00</u>
	14300 N. Northsight Blvd., Su	ite 125		When was the debt incurred? 04/21/2016	
	Number Street Scottsdale,	AZ	85260	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community the claim subject to offset?		ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	No Yes			Other. Specify Collections Account	
4.6	MCSI Inc. Nonpriority Creditor's Name	·		Last 4 digits of account number 7 8 6 6 When was the debt incurred? 06/03/2013	\$_1,200.00
	P.O. Box 327 Number Street		20.400	As of the date you file, the claim is: Check all that apply.	
	Palos Heights City Who incurred the debt? Check one.	IL. State	60463 ZIP Code	Contingent Unliquidated Disputed	
	Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commur Is the claim subject to offset? No Yes	ity debt		Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Coll. Accts. Multiple Accts.	

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Clarissa K. Dochment Page 27 of 51 Case number (# known)

Debtor 1

Your NONPRIORITY Unsecured Claims — Continuation Page Part 2:

<u> </u>	ter listing any entries on this page, l		~~gooding with	. with residence of the and so form.	Total claim
4.7	Cook Magmark Nonpriority Creditor's Name			Last 4 digits of account number 1 1 6 0	\$ 1,795.00
	16501 S. Kedzie Avenue, Ro	oom 119		When was the debt incurred? 01/01/2015	
	Markham	ŧL.	60426	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe Check if this claim is for a comm Is the claim subject to offset? No Yes		ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account	
4.8	Comcast Cable Nonpriority Creditor's Name			Last 4 digits of account number 7 8 6 6	\$ <u>185.00</u>
	P.O. Box 6111			When was the debt incurred? 11/22/2015	
	Number Street Carol Stream	1L	60197	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commetted to the claim subject to offset? No Yes			 □ Contingent □ Unliquidated □ Disputed □ Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Collections Account 	
4.9	e e e				242.00
	Mid AM B&T C			Last 4 digits of account number 7 8 6 6	s 218.00
	Nonpriority Creditor's Name 5109 S. Broadband Lane			When was the debt incurred? 03/16/2016	
	Number Street Sioux Falls	SD	57109	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only	State	ZIP Code	Contingent Unliquidated Disputed	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a commuls the claim subject to offset? ☑ No ☐ Yes	enity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account	

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Clarrisa K. Doc+内格數 Page 28 of 51 Case number (# known)

Debtor 1

Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

er listing any entries on this page, num	ber the	m beginning with	h 4.4, followed by 4.5, and so forth.	Tota	al claim
Metropolitan Auto			Last 4 digits of account number 7 8 6 6	- 5	488.00
Nonpriority Creditor's Name			When was the debt incurred? 02/14/2014	\$_ <u></u>	700.00
2212 W. 147th Street Number Street			THE PROPERTY OF THE PROPERTY O		
	IL.	60426	As of the date you file, the claim is: Check all that apply.		
City	tate	ZIP Code	Contingent		
Who incurred the debt? Check one.			Unliquidated Disputed		
Debtor 1 only					
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only At least one of the debtors and another			Student loans		
☐ Check if this claim is for a communit			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	y debt		Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset? ☑ No			Other. Specify Collections Account		
☐ Yes					
	** *** *				
Equifax Bankruptcy Department	•		Last 4 digits of account number 7 8 6 6	\$	0.0
Nonpriority Creditor's Name P.O. box 740241			When was the debt incurred? 01/01/2012		
Number Street Atlanta	GA	30374	As of the date you file, the claim is: Check all that apply.		
	tate	ZIP Code	Contingent		
Who incurred the debt? Check one.			Unliquidated		
Debtor 1 only			☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that		
$oldsymbol{\square}$ Check if this claim is for a community	y debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset?			other. Specify Collections Account		
M No					
☐ Yes					
				\$	0.00
Experian Bankruptcy Departmen	nt		Last 4 digits of account number 7 8 6 6	·—	
Nonpriority Creditor's Name P.O. Box 2002			When was the debt incurred? 01/01/2012		
Number Street Allen	ГХ	75013	As of the date you file, the claim is: Check all that apply.		
	tate	ZIP Code	Contingent		
Who incurred the debt? Check one.			Uniiquidated		
Debtor 1 only			☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
☐ Debtor 1 and Debtor 2 only			☐ Student loans		
At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a community	y debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset?			Other. Specify Collections Account		
☑ No					

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Clarrisa к. Doral Page 29 of 51 number (# known)

Debtor 1

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Your NONPRIORITY Unsecured Claims - Continuation Page

Afte	r listing any	y entries on this page, n	umber the	m beginning with	4.4, followed by 4.5, and so forth.	Total clair	n
5.3		ion Bankruptcy Cour	t		Last 4 digits of account number 7 8 6 6	\$0.t	00
	P.O. Box				When was the debt incurred? 01/01/2012		
	Number Chester	Street	PA	19022	As of the date you file, the claim is: Check all that apply.		
	City		State	ZIP Code	Contingent		
		ed the debt? Check one.			☐ Unliquidated ☐ Disputed		
	Debtor 1 Debtor 2	•			Type of NONPRIORITY unsecured claim:		
		and Debtor 2 only			☐ Student loans		
		one of the debtors and anothe			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
		subject to offset?	anity debt		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account		
	Mo Yes						
5.4	Chay Su			to the thirt is the total	Last 4 digits of account number 7 8 6 6	s 0.0	
i	Chex System Nonpriority Creditor's Name				. 04/04/0040	<u> </u>	<u> </u>
	7805 Hudson Road				When was the debt incurred? U1/U1/2012		
	Hallingi	Sireet			As of the date you file, the claim is: Check all that apply.		
	City		State	ZIP Code	☐ Contingent ☐ Unliquidated		
		ed the debt? Check one.			☐ Disputed		
	Debtor 1 Debtor 2				Type of NONPRIORITY unsecured claim:		
	Debtor 1	and Debtor 2 only			Student loans		
		ne of the debtors and anothe			Obligations arising out of a separation agreement or divorce that		
	☐ Check if	this claim is for a commu	inity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
		subject to offset?			☑ Other Specify Collections Account		
	₩ No Yes						
5.5				to transfer and transfer a		s 4,079.0	10
2.21	Nicor Ga	S			Last 4 digits of account number 7 8 6 6	\$ 4,079.C	
	Nonpriority Cree		· ',		When was the debt incurred? 04/01/2013		
	P.O. Box Number	U632 Street					
	Aurora	·······························	IL	60507	As of the date you file, the claim is: Check all that apply.		
	City		State	ZIP Code	☐ Contingent ☐ Unliquidated		
		ed the debt? Check one.			☐ Disputed		
	Debtor 1				T (ALOMBRIODIST)		
	Debtor 2	only and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
		ne of the debtors and another	,		 Student loans Obligations arising out of a separation agreement or divorce that 		
	☐ Check if	this claim is for a commu	nity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
		subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Collections Account		
	2 №						

Case 16-16772

Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main

Debtor 1

Clarissa

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Page 30 of 51

Part 3:

List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Accounts Receivab	ole Managemen	t	On which entry in Part 1 or Part 2 did you list the original creditor?			
P.O. Box 1259, De	pt #119881		Line 4.5 of (Check one): Part 1: Creditors with Priority Unsecured Claims			
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims			
Oaks	PA	19456	Last 4 digits of account number 8 5 3 2			
City	State	ZIP Code				
Contract Callers Inc	C.		On which entry in Part 1 or Part 2 did you list the original creditor?			
501 Green Street, I	Room 302		Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims			
Number Street			Part 2: Creditors with Nonpriority Unsecured			
			Claims			
Augusta	GA	30901	Last 4 digits of account number 7 8 6 6			
City	State	ZIP Code				
Steller Recovery	· · · · · · · · · · · · · · · · · · ·	***************************************	On which entry in Part 1 or Part 2 did you list the original creditor?			
1327 Highway 2 W	est 100		Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims			
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims			
Kalispell City	MT State	59901 ZIP Code	Last 4 digits of account number 7 8 6 6			
			On which entry in Part 1 or Part 2 did you list the original creditor?			
Name						
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims			
Number Steet			Claims Part 2: Creditors with Nonpriority Unsecured			
City	State	ZIP Code	Last 4 digits of account number			
		***************************************	On which entry in Part 1 or Part 2 did you list the original creditor?			
Name			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims			
Number Street			Part 2: Creditors with Nonpriority Unsecured			
			Claims			
			Last 4 digits of account number			
City	State	ZIP Code	Last 4 digits of account number			
Name			On which entry in Part 1 or Part 2 did you list the original creditor?			
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims			
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims			
		·	Ciamis			
City	State	ZIP Code	Last 4 digits of account number			
	V.4.	D000	On which pates in Boat 4 as Boat 2 did you list the existent and itse?			
Name			On which entry in Part 1 or Part 2 did you list the original creditor?			
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims			
			Part 2: Creditors with Nonpriority Unsecured Claims			
City	State	ZIP Code	Last 4 digits of account number			

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main

Debtor 1

Dզգկՠգnt

Page 31 of 51

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim	
Total claims from Part 1	6a. Domest	tic support obligations	6a.	\$	0.00
		xes and certain other debts you owe the vernment		\$	0.00
	6c. Claims t intoxica	for death or personal injury while you we lated	re 6c.	\$	0.00
		Add all other priority unsecured claims. at amount here.	6d.	+ \$	0.00
	6e. Total. A	dd lines 6a through 6d.	6e.	\$	0.00
				Total claim	
Total claims from Part 2	6f. Student	loans	6f.	\$	0.00
		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	t 6g.	\$	0.00
	6h. Debts t o similar o	o pension or profit-sharing plans, and oth debts	er 6h.	\$	0.00
		add all other nonpriority unsecured claims. at amount here.	6i.	+ \$	20,072.00

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 32 of 51

					ige 32 of 31	
Fill in this i	iformation to id	lentify you	case:			
Debtor	Clarrisa		Κ.	Thomas		
Debtor 2	First Name	,	fiddle Name	Last Name		
(Spouse If filing)	First Name	,	liddle Name	Last Name		
United States	Bankruptcy Court (for the: North	nern District of	Illinois		
Case number (If known)	h					☐ Check if this is a
 		· · · · · · · · · · · · · · · · · · ·				amended filing
Official I	Form 106	<u> </u>				
		*****	**			
schea	lie G: E	xecut	ory Co	ntracts and	Unexpired Leases	12/15
No. C Yes. i List sepa example unexpired	Fill in all of the in rately each pen rent, vehicle le	nd file this formation beson or compasse, cell pl	rm with the co elow even if th npany with with hone). See the	ourt with your other sched ne contracts or leases are hom you have the contr e instructions for this for	dules. You have nothing else to report on the listed on Schedule A/B: Property (Official ract or lease. Then state what each contin in the instruction booklet for more examp	Form 106A/B). ract or lease is for (for less of executory contracts and
Number	Street					
City		State	ZIP Code		-	
.2						
Name					•	
Number	Street			MATERIAL PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPE	•	
City		State	ZIP Code			
.3						
Name					•	
Number	Street	**************************************				
	0.00.					
City		State	ZIP Code			
.4 Name						
: VGI [IC						
Number	Street			***************************************		
City	······	State	ZIP Code		•	
5						
Name						

Number

City

Street

State

ZIP Code

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 33 of 51

Fill	in this	nformation to ide	ntify your case:				
Deb	otor 1	Clarrisa	K.	Thomas		1	
	4 8	First Name	Middle Name	Last Name			
	itor 2 iuse, if filing)) First Name	Middle Name	Last Name	·····	***************************************	
Unit	ed States	Bankruptcy Court fo	r the: Northern District	of Illinois			
Cas	e numbei	•					
	nown)			**************************************	***************************************]	☐ Check if this is an
							amended filing
Off	icial	Form 106H	1				
Sc	hed	ule H: Yo	— our Codebt	ors			12/15
and recase	Do you had no you had	ether, both are ed the entries in the (if known). Answ have any codebton he last 8 years, ha California, Idaho, I Go to line 3. Did your spouse, for loses. In which commit	pually responsible to boxes on the left. At yer every question. rs? (If you are filing a see you lived in a cortouisiana, Nevada, Newarre spouse, or legal	r supplying correct tach the Additional joint case, do not list mmunity property sew Mexico, Puerto Ri l equivalent live with did you live?	information. I Page to this p either spouse tate or territor co, Texas, Wa you at the time	f more spa age. On th as a codeb y? (Commu shington, al	unity property states and territories include
S	hown ir Schedule	ı line 2 again as a e D (Official Form	codebtor only if that	t person is a guaraı F(Official Form 106l	itor or cosign	er. Make si	pouse is filing with you. List the person ure you have listed the creditor on cial Form 106G). Use Schedule D,
		1: Your codebtor				_	
	Ooiaiiiii	7. Tour codebior					lumn 2: The creditor to whom you owe the debt
3.1						Cf	neck all schedules that apply:
<u> </u>	Name		· · · · · · · · · · · · · · · · · · ·	***************************************		□	Schedule D, line
							Schedule E/F, line
	Number	Street			-/		Schedule G, line
	City		Sta	ite	ZIP Code		
3.2							
	Name			· · · · · · · · · · · · · · · · · · ·			Schedule D, line
	Number	Street					Schedule E/F, line
						u	Schedule G, line
	City		Sta	te	ZIP Code		
3.3				***************************************			Schedule D, line
	Name						Schedule E/F, line
	Number	Street					Schedule G, line
	City	**************************************	Sta	ta	ZIP Code		·
	•		Jidi	· •	Code		

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 34 of 51

Fill in this information t	o identify your case:					
Debtor 1 Clarrisa	K.	Thomas				
First Name Debtor 2	Middle Name	Last Name				
(Spouse, if filing) First Name	Middle Name	Last Name				
United States Bankruptcy Co	urt for the: Northern District of Illinois	S				
Case number(if known)				Check if this i	s:	
				An amend	•	
				A supplem income as	nent showing pos of the following	tpetition chapter 13 date:
Official Form 106I				MM / DD /	YYYY	
Schedule I:	Your Income					12/15
t you are separated and y separate sheet to this for	ation. If you are married and not to come the cours of the course is not filing with you may additional property the course of the course	ı. do not include inf	formation abou	it vour spouse	If more space is a	e daette hahaar
 Fill in your employment information. 	nt	Debtor 1			Debtor 2 or non-f	iling spouse
If you have more than of attach a separate page information about additionally employers.	with		ed	V obstación de mesta transcege una trapación (o propues por elemento).	☐ Employed ☐ Not employed	NO POTATA AND THE STATE OF THE
Include part-time, seaso self-employed work.	onal, or					
Occupation may include or homemaker, if it appl		Admin. Clerk				
	Employer's name	The Callos G	roup	······································		
	Employer's address	480 E. Lincol Number Street	n Highway	N	umber Street	
		Chicago City	IL State ZIP Co	60411 Ci	ih	State ZIP Code
	How long employed the	•			2 1/2 Mths	State Lir Code
Parieza Give Detail	s About Monthly Income					
spouse unless you are s If you or your non-filing s	me as of the date you file this for eparated. spouse have more than one employ space, attach a separate sheet to the spouse have more than one employ space.	er, combine the info				•
solow ii you noou molo	opasse, attack a separate sheet to t	ano igniti.	For D		or Debtor 2 or on-filing spouse	
List monthly gross wa deductions). If not paid	iges, salary, and commissions (b monthly, calculate what the monthly	efore all payroll y wage would be.	2. \$	960.00	\$	
3. Estimate and list mon	thly overtime pay.		3. + \$	0.00 +	\$	
4. Calculate gross incon	ne. Add line 2 + line 3.		4. \$9	960.00	\$	

Official Form 106I Schedule I: Your Income page 1

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main

Page 35 of 51 Document K. Clarrisa **Thomas** Debtor 1 Case number (if known) First Name For Debtor 1 For Debtor 2 or non-filing spouse 960.00 Copy line 4 here..... 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 154.00 5a. 5b. Mandatory contributions for retirement plans 5b. 0.00 5c. Voluntary contributions for retirement plans 5c. 0.00 5d. Required repayments of retirement fund loans 0.00 5d. 5e. Insurance 14.00 5e. 0.00 5f. Domestic support obligations 5f. 0.00 5g. Union dues 5g. 5h. Other deductions. Specify: n/a 5h. 0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 168.00 6. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 792.00 7. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 0.00 monthly net income. 8a 8b. Interest and dividends 8h 0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce 0.00 settlement, and property settlement. 8c. 0.00 8d. Unemployment compensation 8d. 8e. Social Security 8e 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: n/a 8f. 0.00 0.00 8g. Pension or retirement income 8g. 8h. Other monthly income. Specify: n/a 0.00 8h. 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8q + 8h. 0.00 10. Calculate monthly income. Add line 7 + line 9. 792.00 792.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: n/a 0.00 11. + 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 792.00 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form?

Ma.

Yes. Explain:

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 36 of 51

Fill in this information to identif	y your case:			
Debtor 1 Clarissa First Name	K. Thomas	Check if this i	· 0.	
Debtor 2	Middle Name Last Name		-	
(Spouse, if filing) First Name	Middle Name Last Name	An amend		tpetition chapter 13
United States Bankruptcy Court for the	Northern District of Illinois		as of the following	
Case number (if known)	MANUAL LANGUAGE LANGU	MM / DD/	YYYY	
Official Form 106J	Anna de la composition della c			
Schedule J: Yo	ur Expenses			12/15
Be as complete and accurate as p information. If more space is need (if known). Answer every question	ossible. If two married people are fil led, attach another sheet to this forn n.	ing together, both are equally resp n. On the top of any additional pag	onsible for supply es, write your nam	/ing correct
Parivit Describe Your Ho	usehold			
1. Is this a joint case?				
No. Go to line 2. Yes. Does Debtor 2 live in a	separate household?			
☐ No ☐ Yes. Debtor 2 must fi	le Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
2. Do you have dependents?	☐ No	Dependent's relationship to	Donometonite	Phone down and safetime
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.		Boy	13	☐ No ☑ Yes
		Boy	11	□ No ☑ Yes
		Boy	6	☐ No ☑ Yes
		Girl	9	☐ No ☑ Yes
				□ No
Do your expenses include expenses of people other than yourself and your dependents?	☑ No □ Yes			Yes
Part 24 Estimate Your Ongo	ing Monthly Expenses			
Estimate your expenses as of your	r bankruptcy filing date unless you a			
expenses as of a date after the bar applicable date.	nkruptcy is filed. If this is a suppleme	ental <i>Schedule J</i> , check the box at	the top of the forn	n and fill in the
	n-cash government assistance if you d it on Schedule I: Your Income (Offic		Your expe	ncoc
	expenses for your residence. Include		establishmentementemente	TTO TO
any rent for the ground or lot.	opposes for your residence, monage		4. \$	580.00
If not included in line 4: 4a. Real estate taxes				0.00
4a. Real estate taxes4b. Property, homeowner's, or n	entar's insurance		4a. \$	0.00
4c. Home maintenance, repair,			4b. \$	0.00
4d. Homeowner's association of			4c. \$ 4d. \$	0.00
		•	τu. Ψ	

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 37 of 51

		Your exp	penses
Additional mortgage payments for your residence, such as home equity loans	5.	***************************************	0.00
Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	96.00
6b. Water, sewer, garbage collection	6b.	\$	^^ ^
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.		
6d. Other. Specify: n/a	6d.	\$	0.00
Food and housekeeping supplies	7.	\$	300.00
Childcare and children's education costs	A	\$	0.00
Clothing, laundry, and dry cleaning			^^ ^^
Personal care products and services			42.00
Medical and dental expenses			
Transportation. Include gas, maintenance, bus or train fare.		Ψ	
Do not include car payments.	12.	\$	75.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
Charitable contributions and religious donations	14.	\$	0.00
Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	15a.	\$	0.00
15b. Health insurance	15b.	\$	0.00
15c. Vehicle insurance	15c.	\$	48.00
15d. Other insurance. Specify:	15d.	\$	0.00
	16.	\$	0.00
17a. Car payments for Vehicle 1	17a	\$	300.00
17b. Car payments for Vehicle 2		\$	0.00
17c. Other, Specify:			0.00
			0.00
	ffu.	Ψ	
your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	e	0.00
Other navments you make to support others who do not live with you		Φ	0.00
·	10	¢	0.00
		Ψ	0.00
		\$	0.00
			0.00
miner in the mineral advantage	200.	Ψ	0.00
	Sa. Electricity, heat, natural gas Sb. Water, sewer, garbage collection C. Telephone, cell phone, Internet, satellite, and cable services d. Other. Specify: n/a Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106i). Other payments you make to support others who do not live with you. Specify: Specify: ———————————————————————————————————	Back Electricity, heat, natural gas 6a Electricity, heat, natural gas 6a Electricity, heat, natural gas 6a Water, sewer, garbage collection 6a Elephone, cell phone, Internet, satellite, and cable services 6a Clother, Specify: n/a 6d Food and housekeeping supplies 7a Childcare and children's education costs 8a Clothing, laundry, and dry cleaning 9a Personal care products and services 10a Medical and dental expenses 10a Medical and dental expenses 10a Transportation, include gas, maintenance, bus or train fare. 10a Do not include car payments. 10a Entertainment, clubs, recreation, newspapers, magazines, and books 10a Insurance. 10a Insurance. 10a Insurance 10a Insuran	Additional mortgage payments for your residence, such as home equity loans Utilities: a. Electricity, heat, natural gas a. Electricity, heat, natural gas b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satelitie, and cable services 6d. Other. Specify. It/d. Food and housekeeping supplies Childcare and children's education costs Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations 11. S. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations 11. S. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations 12. S. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations 13. S. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations 14. S. 15. Life insurance 15. Life insurance 15. Vehicle insurance 15. S. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify. 16. S. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Taxes. Do not include insurance 15. Vehicle insurance 15. S. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Taxes. Do not include insurance 15. S. Taxes. Do not include insurance 16. S. Taxes. Do not include insurance 17. Car paymen

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Page 38 of 51 Document

Debtor 1		K. ddle Name Last N	Thomas	Case number (if known)_	·	
21. Oti	ner. Specify: <u>n/a</u>			2	1. +\$	0.00
22. Cal	culate your monthly	expenses.				
22a	. Add lines 4 through 2	?1 .		228	s. \$	1,628.00
22b	. Copy line 22 (monthly	y expenses for Debtor	2), if any, from Official Form 1	06J-2 22i	· \$	0.00
220	. Add line 22a and 22b	. The result is your mo	onthly expenses.	220	\$	1,628.00
23. Calc	ulate your monthly n	et income.				
23a.	Copy line 12 (your co	ombined monthly inco	me) from Schedule I.	23	s. \$	792.00
23b.	Copy your monthly e	xpenses from line 22c	above.	23	o. - \$	1,628.00
23c.	Subtract your monthl The result is your mo	y expenses from your inthly net income.	monthly income.	230	s	-836.00
24. Do y	ou expect an increas	e or decrease in vou	r expenses within the year a	fter you file this form?		
			our car loan within the year or			

mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

Z	No.
Z	No.

Yes. Explain here: Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 39 of 51

	nformation to identif	y your case:				
Debtor 1	Clarissa First Name	K.	Thomas Last Name			
Debtor 2 Spouse, if filing) First Name	Middle Name	Last Name			
inited States	Bankruptcy Court for the	E Northern District	of Illinois			
ase number If known)					Q	Check if this is an amended filing
	orm 107	ncial Affa	irs for Ind	ividuals Filing for	Bankruptcy	12/1
ormation. mber (if kn	If more space is nee own). Answer every	eded, attach a sepa question.	arate sheet to this	ling together, both are equally re form. On the top of any additions		
Part 1: G	ive Details About	t Your Marital St	atus and Where	You Lived Before		
•	our current marital	status?				
☐ Marrie ☑ Not m						
	List all of the places y	ou lived in the last 3	3 years. Do not incl Dates Debtor lived there	ude where you live now. 1 Debtor 2:		Dates Debtor 2 lived there
				☐ Same as Debtor 1		Same as Debtor 1
***************************************	20 W. 150th Street	∋t	From 01/01/2			From
NGI	nder Street	· · · · · · · · · · · · · · · · · · ·	To 0 <u>1/01/2</u>	Number Street		То
H:	arvey	IL 60426 State ZIP Code	ACCESSION OF	Cib.	State ZIP Code	
City		State ZIF Code		City Same as Debtor 1	State ZIP Code	Same as Debtor 1
			From			From
				Number Street		То
Nur	mber Street		То			
Nur		State ZIP Code		City	State ZIP Code	10
City . Within the states and No.	e last 8 years, did yo d <i>territories</i> include Ar	ou ever live with a rizona, California, Id	To spouse or legal ed daho, Louisiana, Ne	quivalent in a community propert vada, New Mexico, Puerto Rico, Te	y state or territory? (Co	mmunity property
City 3. Within the states and Monage States.	e last 8 years, did y	ou ever live with a rizona, California, Id	To spouse or legal ed daho, Louisiana, Ne	quivalent in a community propert vada, New Mexico, Puerto Rico, Te	y state or territory? (Co	emmunity property

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 40 of 51

ebtor	Clarissa K. First Name Middle Name	Thomas Last Neme	Case nu	mber (# known)	
Fi	id you have any income from employ ill in the total amount of income you red you are filing a joint case and you have	ceived from all jobs and all bus	inesses, including part-til	me activities.	endar years?
	No Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year u	ntil 2 Wages, commissions,	s 830.00	☐ Wages, commissions,	_
	the date you filed for bankruptcy:	bonuses, tips	\$000.00	bonuses, tips Operating a business	\$
		Operating a business		Operating a business	
	For last calendar year:	Wages, commissions, bonuses, tips	e.	Wages, commissions, bonuses, tips	•
	(January 1 to December 31, 2014	Operating a business	\$	Operating a business	\$
	YYYY	,			
	For the calendar year before that:	Wages, commissions, bonuses, tips		Wages, commissions, bonuses, tips	
	(January 1 to December 31, 2015)	\$ 21,738.00	Operating a business	\$
¥	st each source and the gross income for the file of the following the file of	rom each source separately. D	o not include income tha	t you listed in line 4.	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year u	ıntil	\$		- \$
	the date you filed for bankruptcy		\$		- \$
			\$		- \$
	For last calendar year:				
	(January 1 to December 31,2014				
	100	have a recover to the share were as the shift of the shift of the Shift of the Standard as a second	\$		\$
	For the calendar year before that	tt	\$		\$
	(January 1 to December 31, 2015				\$
	\}\	· · · · · · · · · · · · · · · · · · ·	\$	- · · · · · · · · · · · · · · · · · · ·	- \$

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Page 41 of 51 Document

ebtor 1	First Name Middle Na	ime N.	Last Name	HUIHAS	Case	number (if known)	
Part 3:	List Certain Payn	nents You	ı Made Befo	re You Filed	l for Bankruptcy		
. Are eith	ner Debtor 1's or Deb	ntor 2's del	sts nrimarily c	onsumer deh	ite?		
						re defined in 11 U.S.C. § 10	1(0)
14 0.	"incurred by an indiv	idual prima	rily for a persor	nal, family, or t	household purpose."	re defined in 11 0.5.C. § 10	1(8) as
	During the 90 days b	oefore you f	iled for bankru	ptcy, did you p	ay any creditor a total of	f \$6,225* or more?	
	No. Go to line 7.						
	total amoun	it you paid t	hat creditor. D	o not include p	payments for domestic s	or more payments and the upport obligations, such as	
					ments to an attorney for	this bankruptcy case. after the date of adjustment.	
ε λ						anci the date of adjustment.	
Yes Yes	During the 90 days to					(\$600 ar mara?	
	_		neu for bankruj	рісу, ака уой р	ay any creditor a total of	1 \$600 or more?	
	No. Go to line 7.						
						otal amount you paid that	
					oort obligations, such as ey for this bankruptcy ca		
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Creditor's Name			***************************************	\$	\$	☐ Mortgage
							☐ Car
	Number Street						Credit card
	***************************************						Loan repayment
							Suppliers or vendors
	City	State	ZIP Code				Other
	Creditor's Name				\$	\$	Mortgage
							🔲 Car
	Number Street						Credit card
							Loan repayment
		Marker Hard Ambred advancedor and ben		***************************************			Suppliers or vendors
	City	State	ZIP Code				Other
					\$	\$	п
	Creditor's Name				*		☐ Mortgage ☐ Car
							☐ Car☐ Credit card
	Number Street						Credit card Classification Loan repayment
	300000000000000000000000000000000000000			*******************			Suppliers or vendors
							Other
	City	State	ZIP Code				- Ottel

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 42 of 51

Thomas

or 1	Clarissa	<u>K.</u>	Thomas		Case number (if known)
	First Name Midd	le Name Last Name				•
Inside corpo agen	ers include your relat prations of which you t, including one for a	are an officer, director, business you operate a	rs; relatives of any person in control, o	general partners; or owner of 20% or	partnerships of which more of their voting	who was an insider? ch you are a general partner; g securities; and any managing or domestic support obligations,
such	as child support and	alimony.				
22 N						
W Y	es. List all payments	to an insider.	Dates of	Total amount	A	Decree for this account
			payment	paid	owe	Reason for this payment
				\$	\$	
	Insider's Name			Ψ	_ Ψ	
	Number Street					
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	City	State ZiP Code				
	Insider's Name		***************************************	\$	\$	
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	City	State ZIP Code				
Withia	n 1 year before you	filed for bankruptcy, d	id you make any p	ayments or trans	fer any property o	n account of a debt that benef
	sider? le payments on debts	s guaranteed or cosigne	d by an insider.			
Z		3	,			
		that benefited an insider	<u>.</u>			
			Dates of	Total amount	Amount you still	Reason for this payment
			payment	paid	owe	Include creditor's name
				\$	\$	
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Ť	City	State ZIP Code				

Clarissa

K.

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 43 of 51

or 1	Clarissa	K.	Thomas	Case number (#known)		
	First Name Middle Nam	e Last Name				
int 4:	Identify Legal Act	ione Panoceacci	one and Earaniaeu	IPA.C		
	8					
I NJIVV Ictoil	n 1 year betore you tile: Il such matters, including	o for bankruptcy, we	ere you a party in any	lawsuit, court action, or admit , divorces, collection suits, paterr	nistrative proc	eeding?
	ontract disputes.	personal injury case.	s, sman craims actions	, divorces, collection suits, paterr	iny actions, su	port of custody modifical
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 10	es. Fili in the details.					
		Nate	re of the case	Court or agency		Status of the case
(Case title			Court Name	· · · · · · · · · · · · · · · · · · ·	Pending
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,	Case title					Pending
	,ase tide			Court Name		On appeal
-	····	 				
				Number Street		Concluded
C	Case number					
				City State	ZIP Code	
Ū Y€	es. Fill in the information i	below.	Describe the prop	orb.	Date	Value of the property
			peacine die blob	erty	Date	value of the property
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	Number Street		Explain what happ	pened		
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				s repossessed. s foreclosed.		
			Property was			
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			Describe the prop	erty	Date	Value of the proper
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Property was attached, seized, or levied.

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 44 of 51

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Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Page 45 of 51 Document Clarissa **Thomas** Case number (if known)_ 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities Describe what you contributed Date you Value that total more than \$600 contributed Charity's Name Street City State ZIP Code **List Certain Losses** 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? MO No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred lost loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. **List Certain Payments or Transfers** 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone

Part 7:

Part 6:

Debtor 1

you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Description and value of any property transferred

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☐ No

Yes. Fill in the details.

001Debtorcc Inc. transfer was Person Who Was Paid made 372 Summit 05/03/2016 14.95 Number Street Jersey City NJ 07306 State ZIP Code

Email or website address

www.001debtorcc.com

Person Who Made the Payment, if Not You

Amount of payment

Date payment or

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 46 of 51

Debtor 1	Clarissa First Name M	K.	Thomas		Case number (if known)	to the standard and the first and the first and the standard and the stand		
	1 Dat (Spirit)	toric resilie	ERST INDICATE					
			Description and va	alue of any property tr	ansferred	Date payment or transfer was made	Amouni paymen	
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						**************************************	Φ	
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	tatavetell@ueba							
	tstoxstell@yahoo Email or website address		Pool Analysis					
	Person Who Made the Pa	symant if blot Vou	_					
pro Do 120	omised to help you on not include any paym	leal with your cre nent or transfer tha	uptcy, did you or anyo editors or to make pay at you listed on line 16.			ster any property t	o anyone	WIIO
		,	Description and va	alue of any property tra	insferred	Date payment or	Amount o	of paymen
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trai Incl Do	nsferred in the ordir lude both outright tran not include gifts and	nary course of yoursfers and transfe transfers that you	ruptcy, did you sell, tr ur business or financi rs made as security (such have already listed on t	ial affairs? ch as the granting of		-		rty
			Description and va	alue of property	Describe any property of debts paid in exchan		Date was r	transfer made
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	<u> </u>		_					
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	Person's relationship t	o you	_					
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	City	State ZIP Code	anns.					
	Person's relationship t	o vox						

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Page 47 of 51 Document Clarissa **Thomas** Debtor 1 Case number (if known)_ 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Mo No Yes. Fill in the details. Description and value of the property transferred Date transfer was made Name of trust Parted: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. M No Yes, Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before instrument closed, sold, moved, closing or transfer or transferred Name of Financial Institution Checking ☐ Savings Number Street Money market Brokerage City State ZIP Code Other ☐ Checking Name of Financial Institution ☐ Savings Money market Number Street ☐ Brokerage Other_ City State ZIP Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? M No Q Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? ☐ No ☐ Yes Name of Financial Institution Name Number Street Number Street

City

ZIP Code

City

State

ZIP Code

State

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 48 of 51

	Clarissa	K.	Thomas	Case number (if known)	
	First Name	Middle Name La	st Name		
22. Have	you stored prope	erty in a storage unit	or place other than your home v	vithin 1 year before you filed for bankruptcy	?
-	o es. Fill in the deta	iis.			
			Who else has or had access to it	? Describe the contents	Do you stil have it?
					□ No
	Name of Storage Facil	lity	Name	Market lands of the detailed for resonance	Yes
	Number Street		Number Street		
			City State ZIP Code	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	City	State ZIP Code			
Part 9	Identify P	roperty You Hold	or Control for Someone Else		
	ou hold or contro old in trust for so		someone else owns? Include any	property you borrowed from, are storing fo	г,
Ø i					
.	es. Fill in the det	ails.			
			Where is the property?	Describe the property	Value

	Owner's Name				\$
	Number Street	**************************************	Number Street		
	Number Street		•••••		
	Number Street				
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Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 49 of 51

Debtor 1	Clarissa First Name	Middle Name	K.	Thomas	Case number (if known)	
	rist Name	Middle Name	Las	st Name		
		iny governme	ntal unit (of any release of hazardous i	material?	
2	No Yes. Fill in the	datalla				
territ.	tes. riii in uie i	uetans.		Governmental unit	Environmental law, if you know it	Date of notice
	Name of site					
	regine of alte			Governmental unit		Palmada da Santa da Cara da Car
	Number Street			Number Street		
				-		
				City State ZIP C	ode	
	City	State	ZIP Code	_		
26. Hav	e you been a pa	arty in any juo	licial or a	dministrative proceeding und	der any environmental law? Include settlemer	nts and orders.
ZÍ	No					
	Yes. Fill in the	details.				
				Court or agency	Nature of the case	Status of the case
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Part 1				siness or Connections to		
					s or have any of the following connections to her activity, either full-time or part-time	any business?
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İ	🔲 A partner in	a partnershi	p			
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	No. None of the					
' ليا	Yes. Check all t	that apply abo	ove and fi	If in the details below for eac Describe the nature of the b		n number
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	City	State	ZIP Code			

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Page 50 of 51 Document Clarissa Thomas Debtor 1 Case number (if known)_ **Employer Identification number** Describe the nature of the business Do not include Social Security number or ITIN. **Business Name** Number Street Name of accountant or bookkeeper Dates business existed From _____ To __ City State ZIP Code 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. 2 No Yes. Fill in the details below. Date issued Name MM / DD / YYYY Number Street City ZIP Code Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Signature of Debtor 2 Date 5-16-2016 Date_ Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ₩ No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Yes. Name of person Tania Stoxstell

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 16-16772 Doc 1 Filed 05/18/16 Entered 05/18/16 14:53:30 Desc Main Document Page 51 of 51

			9	
ill in this information	n to identify your case:			
ebtor 1 Clarrisa		Thomas		
First Name ebtor 2	Middle Name	Łast Name		
pouse, if filing) First Name	Middle Name	Last Name		
nited States Bankruptcy ase number	Court for the: Northern District of	of Illinois		
f known)		War dawarin		
		· · · · · · · · · · · · · · · · · · ·		Check if this is amended filing
				· ·
Official Forn	1 106Dec			
Declarat	ion About an	Individua	l Debtor's Schedules	12/15
				12/13
two married people	e are filing together, both are	equally responsible for	er supplying correct information.	
Sign Be		NOT an attorney to help	o you fill out bankruptcy forms?	
	person Tania Stoxstell		Attach Bankruptcy Petition Preparer's Notice, Declaration	and
			Signature (Official Form 119).	, 470
that they are true	se Shomes	*	schedules filed with this declaration and	
oignature of Debtol	į	Signature of D	abtor 2	
Date <u>05 / 6 /</u>	10/10	Date		